



E8 68-01

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

JC971 U.S.P.T.O.
09/923480 PR
08/06/01

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.	AB-878-1D US
		First Named Inventor or Application Identifier	Sang-Guen Kim, Seung-Chul Ahn
		Title	Die Bonding Equipment (As Amended)
		Express Mail Label No.	EL 699 358 013 US
APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small>		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form - <i>see page 2 of this form.</i> <small>(Submit an original, and a duplicate for fee processing)</small>		6. <input type="checkbox"/> Microfiche Computer Program Appendix consisting of _____ pages of microfiche containing _____ frames on each page in accompanying envelope.	
2. Application: <input type="checkbox"/> Specification: (preferred arrangement set forth below) Descriptive title of the Invention. Cross References to Related Applications. Reference to Microfiche Appendix. Background of the Invention. Brief Summary of the Invention. Brief Description of the Drawings, and Detailed Description (all totaling 15 pages) Appendix(es) _____ & _____ (____ pages) <input checked="" type="checkbox"/> Claim(s) <u>5</u> pages <input checked="" type="checkbox"/> Abstract of the Disclosure <u>1</u> page		7. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ol style="list-style-type: none"> <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> Statement verifying identity of above copies 	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <small>[Total Sheets <u>9</u>] Total Pages _____</small> 4. Oath or Declaration <input type="checkbox"/> unsigned <small>[Total Pages _____]</small> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from prior application (37 CFR §1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> c. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small>		ACCOMPANYING APPLICATION PARTS <ol style="list-style-type: none"> <input type="checkbox"/> Assignment Papers (cover sheet & documents) _____ pages <input type="checkbox"/> 37 CFR §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(combined when there is an _____ with Patent Declaration Assignee) _____ above.)</small> <input type="checkbox"/> English Translation Document (if applicable) <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS) & <input checked="" type="checkbox"/> PTO-1449 Citations/References <small>References not included. Cited in parent application SN 09/406,916</small> <input checked="" type="checkbox"/> Preliminary Amendment <u>26</u> pages <input checked="" type="checkbox"/> Return Receipt Postcard (MPR-P 503) <small>(should be specifically itemized)</small> <input type="checkbox"/> Small Entity Status <ul style="list-style-type: none"> <input type="checkbox"/> Small Entity Statement Enclosed _____ pages <input type="checkbox"/> Statement filed in prior application; and status still proper and desired <input type="checkbox"/> Is no longer claimed. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> <input checked="" type="checkbox"/> Other: <ul style="list-style-type: none"> <input type="checkbox"/> Request To Amend Drawings Under 37 C.F.R. § 1.121 <input type="checkbox"/> Copy of Figure 6B amended as shown in red ink. 	
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information and a preliminary amendment: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional of prior application No. 09/406,916 <small>Filed on <u>September 24, 1999</u>, entitled: <u>Die Bonding Method For Manufacturing Fine Pitch Ball Grid Array Packages</u>.</small>			
PRIOR APPLICATION INFORMATION: Examiner <u>Scott B. Geyer</u> Group Art Unit <u>2813</u>			
18. CORRESPONDENCE ADDRESS			
<input type="checkbox"/> Customer Number or Bar Code Label Name David W. Heid Attorneys for Applicant Skjerven Morrill MacPherson LLP Address 25 Metro Drive, Suite 700 City San Jose State CA Zip Code 95110 Country United States Telephone (408) 453-9200 Fax (408) 453-7979		<input type="checkbox"/> Correspondence address below <small>Reg. No. 25,875</small>	

Please type plus sign (+) inside this box

[]
+

19. Fee calculations.

CLAIMS (Number Filed)	(1) FOR	(2)	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
5	TOTAL CLAIMS (37 CFR 1.16(c))	-20	= 0	x \$18	= \$ 0 00
1	INDEPENDENT CLAIMS (37 CFR 1.16(b))	-3	= 0	x \$80	= \$ 0 00
<input type="checkbox"/>	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.18(d))		+ \$260.00		=
			BASIC FEE (37 CFR 1.16(a))	=	\$ 710.00
			Total of above Calculations	=	\$ 710.00
			Reduction by 50% for filing by small entity (Note 31 CFR 1.9, 1.27, 1.28)	=	
			TOTAL	=	\$ 710.00

20. FEES: The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No.

19-2386:

- a. Fees required under 37 CFR 1.16. (U.S. Application Filing Fees)
- b. Fees required under 37 CFR 1.17. (Conditional Extension of Time Fees)
- c. Fees required under 37 CFR 1.18. (Patent Issue Fees)

21. Other: _____

NOTE: The prior application's correspondence address will carry over to this UPA UNLESS a new correspondence address is provided below.

22. NEW CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label	<input type="checkbox"/> New correspondence address below	
NAME		
ADDRESS		
CITY	STATE	ZIP CODE
COUNTRY	TELEPHONE	FAX

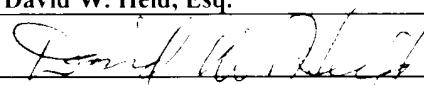
23. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Skjerven Morrill MacPherson LLP

25 Metro Drive, Suite 700

San Jose, CA 95110

Tel. (408) 453-9200 Fax. (408) 453-7979

Date:	August 6, 2001		
Name	David W. Heid, Esq.	Reg. No.	25,875
Signature			
Express Mail Label No.	EL 699 358 013 US		